## N17000007927

(Requestor's Name)  (Address)  (Address)	300353096703		
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	10/14/2901033011 <b>**</b> 1 <b>0</b> 5.90		
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	2020 : :: :: 11: 7: 54		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	CNB HOUSING	FOUNDATION,	INC.	_	
DOCUMENT NUMBER:	N17000007927				
The enclosed Articles of Amendme	ent and fee are sub	mitted for filing.		· · ·	
Piesse return all correspondence o	oncerning this matt	er to the following:			
		S. MARSHALL N	<b>IARTIN</b>		
		(Name of Contact	Person)		
	c/o cm	TY NATIONAL BA	NK OF FLOI	RIDA	
		(Firm/ Compa	ny)	<del>_</del>	
	1	00 SE 2nd Street, 1	3th Floor		
		(Address)		<del></del> -	
		Miami, FL 331	131		
		(City/ State and Zi	p Code)		
	Legs	department@cityr	ational.com		
E-mail	eddress: (to be used	for future annual r	eport notificat	ion)	
For further information concerning	this matter, please	call:			
S. M	arshall Martin		305 at	5 <i>7</i> 7-7333	
(Name	e of Contact Person		(Area Code	e) (Daytime Telepl	none Number)
Enclosed is a check for the followi	ng amount made p	eyable to the Florid	a D <del>epartmen</del> t	of State:	
■ \$35 Filing Fee □\$43 Ce	3.75 Filing Fee & artificate of Status	S43.75 Filing Fe Certified Copy (Additional copy enclosed)	Cen ris Cen (Ad	2.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	
Mailing Addres	4	\$	treet Addres	1	

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CNB HOUSING FOUNDATION, INC.

(Name of Corporation as currently filed with the Flor	da Dept, of State)	
N	17000007927	
(Document N	umber of Corporation (if k	10W1)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	oaration" or "incorporated	!" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	756)	
(Principal office address MUST BE A STREET ADDRI	<u> </u>	203
		0
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
(Manual servers WAT DO V LAND ALVAND BAND)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	office address in Florida. ice address:	enter the name of the
Name of New Registered Agent:		
		orida street address)
New Registered Office Address:	(4.4	
		Florida
<del></del> -	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ered Agent:	the obligations of the position.
1 петену вссеря те арронители аз гезуметей азет. 1 и	m jamear wan ana acep	are conference of the beautier.
	Signature of New People	ened Agent il changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT         John De           V         Mike Je           SV         Sally Se	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change Add	<u>CFOT</u>	DANIEL KUSHNER	100 SE 2nd Street Miami, Florida 33131
X Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional she		ticles, enter change(s) here: (Be specific)	
	<u> </u>		
<del></del>			

	·	
The date of each amendment(s) adoption date this document was signed.	on: September 23, 2020	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	oes not meet the applicable statutory filing requirements, this date wi	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	ed by the members and the number of votes cast for the amendment(s	)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated September 25, 2020	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
S. MARSHALL MARTIN	
(Typed or printed name of person signing)	
PSD	
(Title of person signing)	